

GENERAL PAYROLL

DSWD-ARMM

September 1-30, 2015

Period

No. \_\_\_\_\_

Sheet \_\_\_\_\_ of \_\_\_\_\_

I acknowledge receipt of cash shown opposite our name as full compensation for services rendered for the period covered.

No.	NAME	POSITION	Monthly Salary	Other Compensation ACA/PERA	PBB 2014	DEDUCTIONS														Net Amount Due	Signature of Recipient			
						Life and Retirement	Medicare		Policy Loan	UOLI Prem.	Conso Loan	Cash Advance Plus	LBP Loan	Em-Loan	CEAP Premium	Educ. Loan	GSIS HL	HDMF Contr.	HDMF Loan			HDMF H. Loan	Withholding Tax	
1	AYAON, Bai Sahara	SWOI	18,549.00		2,500.00																	200.00	2,300.00	<i>[Signature]</i>
2	BALINDONG, Casanoden	SWA	15,693.00		10,000.00																	800.00	9,200.00	<i>[Signature]</i>
3	CONDOR, Remedios	SWO III	33,846.00		10,000.00																	800.00	9,200.00	<i>[Signature]</i>
4	DIBAROSAN, Zenaida	SWO III	33,478.00		5,000.00																	400.00	4,600.00	<i>[Signature]</i>
5	DIMNATANG, Sambitory	SWAsst.	16,009.00		5,000.00																	400.00	4,600.00	<i>[Signature]</i>
6	IBRAHIM, Minompong	SWAsst.	16,009.00		5,000.00																	400.00	4,600.00	<i>[Signature]</i>
7	ISITO, Ma. Chona	SWAide	11,519.00		10,000.00																	800.00	9,200.00	<i>[Signature]</i>
8	MACATOON, Samaona	SWAsst.	15,081.00		10,000.00																	800.00	9,200.00	<i>[Signature]</i>
9	MALATUS, Snauya	SWO III	33,846.00		5,000.00																	400.00	4,600.00	<i>[Signature]</i>
10	MANDANGAN, Rogainah	SWAsst.	16,009.00		5,000.00																	400.00	4,600.00	<i>[Signature]</i>
11	MANGONTRA, Omingsalam	SWAsst.	16,009.00		5,000.00																	400.00	4,600.00	<i>[Signature]</i>
12	MANGONDATO, Ibrahim	SWOI	18,549.00		2,500.00																	200.00	2,300.00	<i>[Signature]</i>
13	MAROHOM, Ragaoray	SWAide	11,987.00		5,000.00																	400.00	4,600.00	<i>[Signature]</i>
14	MAROHOM, Sania	SWAsst.	16,009.00		5,000.00																	400.00	4,600.00	<i>[Signature]</i>
5	MLA, Dimnatang	SWAsst.	16,009.00		5,000.00																	400.00	4,600.00	<i>[Signature]</i>
6	MIRA-ATO, Sarima	SWAsst.	15,232.00		5,000.00																	400.00	4,600.00	<i>[Signature]</i>
7	MUSTAPHA, Sittie Norainie	SWO I	18,735.00		5,000.00																	400.00	4,600.00	<i>[Signature]</i>
8	OMA, Noralina	SWO 111	33,846.00		10,000.00																	800.00	9,200.00	<i>[Signature]</i>
9	PANGKAT, Linang	SWO 111	33,846.00		10,000.00																	800.00	9,200.00	<i>[Signature]</i>

RECEIVED  
DEPARTMENT OF 500

**GENERAL PAYROLL**

DSWD-ARMM

September 1-30, 2015

Period

No. \_\_\_\_\_

Sheet \_\_\_\_\_ of \_\_\_\_\_

We acknowledge receipt of cash shown opposite our name as full compensation for services rendered for the period covered.

No.	NAME	POSITION	Monthly Salary	Other Compensation ACA/PERA	PBB 2014	DEDUCTIONS															Net Amount Due	Signature of Recipient			
						Life and Retirement	Medicare	Policy Loan	UOLI Prem.	Conso Loan	Cash Advance Plus	LBP Loan	Em-Loan	CEAP Premium	Educ. Loan	GSIS H/L	HDMF Cont.	HDMF Loan	HDMF H. Loan	Withholding Tax					
20	SARIP, Aromay	SWAsst.	16,009.00		5,000.00																		400.00	4,600.00	<i>[Signature]</i>
21	SEDIC, Casamela	SWAsst.	15,081.00		10,000.00																		800.00	9,200.00	<i>[Signature]</i>
22	TABUA, Corinne	SIWO V	53,709.00		15,000.00																		1,200.00	13,800.00	<i>[Signature]</i>
23	TANOG, Normila	SWO I	31,351.00		5,000.00																		400.00	4,600.00	<i>[Signature]</i>
24	WATAMAMA, Inolawan	SWAsst.	16,009.00		5,000.00																		400.00	4,600.00	<i>[Signature]</i>
GRAND TOTAL			522,420		160,000																		12,800.00	147,200.00	

One Hundred Forty Seven Thousand Two Hundred Pesos Only.

P 147,200.00

*[Signature]*  
CORINNE G. TABUA, RSW

PSWO

*[Signature]*  
CORINNE G. TABUA, RSW

PSWO

CERTIFIED: Supporting documents complete and proper, and cash

available in the amount of P 147,200.00.

*[Signature]*  
MA. CHONA R. ISITO

Designated Bookkeeper

CERTIFIED: Each employee whose name appears above has

been paid the amount indicated opposite on his/her name.

*[Signature]*  
CASANODEN M. BALINDONG

Special Disbursing Officer

ALOBS \_\_\_\_\_  
Date \_\_\_\_\_  
JEV \_\_\_\_\_  
Date \_\_\_\_\_

Date